U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF Ernesto	Santiag	(COURT CASE NUM	BER . 05-153 E
DEFENDANT	csarring (4,		TYPE OF PROCESS	.03-133
Warden, Jan	nes SHi	ermar		CivilP	Righte Acti
				DESCRIPTION OF PROPERTY T	O SEIZE OR CONDEMN
4	ED STATES ATTO			partment of	Justice
	or RFD, Apartment No., C			(307 111 131 11 13 11	348.100
• •	nnsylvani			Washington	DC 2053
SEND NOTICE OF SERVICE COPY				Number of process to be	28 USC 133
	0		1020	scrved with this Form 285	
1 timesis.	Sanhago	2. dC20.	4038	Number of parties to be	
F. O. Box 8000			served in this case	1.3	
Bradfor	21 A96	701		Check for service	
	,			on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHE	ED INTERPARATION TUA	T WILL ACCIO	T DI EVECTORE C		44
4# Telephone Numbers, and Estimate			IN EXPEDITINGS	ERVICE (INCHAE DUSINESS AND A	HIEFMAIE AGGRESSES,
,					Feld
ignature of Attorney other Originator re	traan		PLAINTIFF DEFENDANT	TELEPHONE NUMBER	DATE 9-18-05
SPACE BELOW FOR U	JSE OF U.S. MA	RSHAL O	NLY- DO NO	OT WRITE BELOW	THIS LINE
cknowledge receipt for the total To	tal Process District of	District to	Signature of Autho	rized USMS Deputy or Clerk	Date
imber of process indicated. ign only for USM 285 if more	Origin	Scrve			
an one USM 285 is submitted)	No	No			
creby certify and return that I have the individual, company, corporation,	personally served , ha	ave legal evidence above on the on	e of service, have the individual, comp	executed as shown in "Remarks" any, corporation, etc. shown at the	, the process described address inserted below.
I hereby certify and return that I am	unable to locate the individ	dual, company, o	Orporation, etc. name	l above (See remarks below)	
Name and title of individual served (if not shown above)			A person of suita		
				of abode	cfendant's usual place
dicess (complete only different than sho	wn above)			Date // /	Time am
				14/05	
				Signature of U.S. Mar	rshalar Deputy
vice Fee Total Mileage Charges	s Forwarding Fee Te	otal Charges	Advance Deposits	Amount owed to U.S. Marsha	I* or
including endeavors)		Yes		(Amount of Refund*)	
MARKS TO ALL MARKS	1 20,000 00	7/12 01	0 000	<u> </u>	
MARKS: 5/C Mailel 9	-48-07 AR	72 801	9 7340		

PRINT 5 COPIES:

- I. CLERK OF THE COURT
- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

 5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rcv. 12/15/80 Automated 01/00

2. Article Number	COMPLETE THIS SECTION ON DELIVERY		
	A. Received by (Please Print Clearly) B. Date of Delivery		
	x OCT 9 4 2005 Agent Addressee		
7160 3901 9842 8019 7340	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No		
3. Service Type CERTIFIED MAIL			
4. Restricted Delivery? (Extra Fee)	P: 32		
Article Addressed to:			
UNITED STATES ATTORNEY GENERAL DEPARTMENT OF JUSTICE 950 PENNSYLVANIA AVENUE N.W. WASRINGTON, D.C. 20530	EXEGRACED		
5-153E,S/C,9/28/05.5RB	· · · · · · · · · · · · · · · · · · ·		
PS Form 3811, January 2003	Domestic Return Receipt ,		